

	MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES CHILD AND ADULT CARE FOOD PROGRAM	ISSUED	REVISED	CHAPTER	SECTION
	EMERGENCY/HOMELESS SHELTERS POLICY & PROCEDURE MANUAL	6/1/02	4/09	5	5.6
CHAPTER Chapter 5. Requirements of Management		SUBJECT Civil Rights Complaint Procedure			

Any person alleging discrimination based on race, color, national origin, sex, age, or disability has a right to file a complaint within 180 days of the alleged discriminatory action. Under special circumstances, the time limit may be extended by the Office of Minority Affairs.

All Civil Rights complaints, written or oral, shall be accepted and forwarded to the Civil Rights Division through the Mountain Plains Regional Office or the Missouri Department of Health and Senior Services – Bureau of Community Food and Nutrition Assistance (MDHSS-BCFNA). The complaint should contain the following information:

- Name, address, and telephone number or other means of contacting the complainant;
- The specific location and name of the entity delivering the service or benefit;
- The nature of the incident or action that led the complainant to feel discrimination was a factor or an example of the method of administration which is having a disparate effect on the public, potential participants, or participants;
- The basis on which the complainant feels discrimination exists;
- The names, titles, and business addresses of persons who may have knowledge of the discriminatory action; and
- The date during which the alleged discriminatory actions occurred, or if continuing, the duration of such actions.

The complaint will be reviewed and acted upon by the U.S.D.A. Mountain Plains Regional Office.